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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)****TRANSMITTAL**Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/809,268
Filing Date	March 25, 2004
First Named Inventor	Takashi ONO, et al.
Art Unit	1795 Confirmation No. 6921
Examiner Name	Monique M. Wills
Attorney Docket Number	81707.0193

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114**

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____.
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☒ Affidavit(s)/Declaration(s)
- iii. ☒ Information Disclosure Statement (IDS)
- iv. ☐ Other:

2. **Miscellaneous**

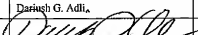
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(e) for a period of ____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other:

3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. **50-1314**
- i. ☒ RCE fee required under 37 CFR 1.17(e) **\$810**
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☒ Extra Claim Fees **\$420**
- b. ☐ Check in the amount of \$_____ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

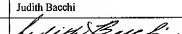
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print Type)	Darius G. Adli	Registration No. (Attorney Agent)	51,386
Signature		Date	September 16, 2008

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being transmitted via electronic filing to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Name (Print Type)	Judith Baocchi	Date	September 16, 2008
Signature			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.